5/31/2005 14:28 FAX 702 388 0210	DDCP		∄ 001/003
CAMPAIGN CONTRIBUTIONS	City of Las Vo	egas/State of	Nevada
AND EXPENSES REPORT	PERMANY election		
DEBBIE KITTERMAN BURGOS	CANDITRATE for City Con	incil WARD	ct (if applicable)
Name (print)	Office (if applicable) NV 8913/	400-360	9
Malling Address (include city and zip code)		Telephone No.	
E-Mail Address	the comment of the co	d	. 100
Select Appropriate Box(es) CANDIDATE PAC	☐BAG ☐ POL PRTY ☐ IND EXP ☐ A	MENDED ANNU	JAL FILING
Report #1 — Due March 29, 20	05 Jan. 1, 2005 — Mar. 24, 2005	L COO2	Zons v
Report #2 — Due May 31, 2005 Period:	Mar. 25, 2005 — May 26, 2005	MATS	NECE NECE
Report #3 Due — July 15; 2005	May 27, 2005 — June 30, 2005	For Office Use	_ ~~~
CONTRIBUTIONS SUMM	IARY	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received	in Excess of \$100	224.00	.5215, 77
2. Total Monetary Contributions Received	of \$100 or Less	9	0.00
	This Period Cumulative From Beginning of Report Period #1 Through End of This Reporting Period		
3. Total Amount of Monetary Contributing Received		1224.00	5215.7
(Add Lines 1 and 2)4. Total Value of In Kind Contributions Re Excess of \$100	ceived in		
	EXPENSES SUMMARY		
5. Total Monetary Expenses Paid in Exce	ss of \$100	3020.67	4575,13
6. Total Monetary Expenses Paid of \$100		792.78	640.10
7. Total Amount of All Monetary Expen (Add Lines 5 and 6)	ses Pald	200	5 215.2
8. Total Value of In Kind Expenses in Exc of \$100	ess d	3223,45	
	AFFIRMATION	Corect	

I Declare Under Penalty of Perjury That the Foregoing, is True and Correct.

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Revised: Jan-04

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Rep	ort	Per	riod

PBBIE KITTERMON	BURGOS	CITY	Council	lus
		Office (if applied	<u> </u>	

District (if applicable)

Name (print)

Office (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
Debbie BURGOS GILLINGS WATON P9131	3/25/05	1224.00	
·			2005
			RECEIVED CITY CLERK
			P 2:
			52

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Revised: Jan-05

CAMPAIGN EXPENSES		ΔΜ	PΔ	IGN	EXP	EN	SES
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Re	port	Per	iod	ا ،

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Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	
DSAYS ENTERTAINMENT 3560 POLATIS AVE #6 LAS VELAJ NV 89103	Н	4/2/2005	495,00
PDG Prinzing 3820 5. VAIRY VIEW BLVD LV NV 89103	D	3/25/05	2525.67
			λΕς ΥΤΙΩ ΝΑΥ
			EIVED. CLERK
			52
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Rev: Jan -04